## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 CLAIMS AS FILED - PART I

Application or Docket Number

21520-RA-10/102622=

| (Column 1) (Column 2)  |  |   |                          |                                |              |                  |            | TYPE               |                        |       | OR SMALL ENTITY     |                        |  |
|--|--|---|--------------------------|--------------------------------|--------------|------------------|------------|--------------------|------------------------|-------|---------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 20                       |                                |              |                  | Г          | RATE               | FEE                    |       | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED             |                                | NUMBER EXTRA |                  | Ε          | BASIC FEE          | 375.00                 | OR    | BASIC FEE           | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | $20_{\text{minus } 20=}$ |                                |              |                  |            | X\$ 9=             |                        | OR    | X\$18=              |                        |  |
| INDEPENDENT CLAIMS   |  |   | - 9 9 mi                 | nus 3 =                        | <u> </u>     |                  |            | X42=               |                        | OR    | X84=                |                        |  |
| MU   | LTIPLE DEPEN   | IDENT CLAIM PI                            | RESENT                   |                                |              |                  |            | +140=              |                        | OR    | +280=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                          |                                |              | Ŀ                | TOTAL      | 375                | OR                     | TOTAL |                     |                        |  |
| CLAIMS AS AMENDED - PART II  |  |   |                          |                                |              |                  |            | <u> </u>           |                        |       | OTHER               |                        |  |
| 7  | 13/04  |   | <u> : </u>               | (Colur                         |              | (Column 3)       | _          | SMALL              | ENTITY                 | OR    | SMALL               | ENTITY                 |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                          | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | . 20                                      | Minus                    | ** 5                           | 20           | a -              |            | X\$ 9=             |                        | OR    | X\$18=              |                        |  |
|  | Independent  | * 3                                       | Minus                    | ***                            | 3            | = -              |            | X42=               |                        | OR    | X84=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=   |   |                          |                                |              |                  |            |                    |                        | OR    | +280=               |                        |  |
| •  |  |   |                          |                                |              |                  |            | TOTAL<br>DDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE | ·                      |  |
|  | · ,  |   | -                        |                                |              |                  |            |                    |                        |       |                     |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                          | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| N<br>N   | Total  | *   | Minus                    | **                             |              | =                |            | X\$ 9=             |                        | OR    | X\$18=              |                        |  |
| AME  | Independent  | ANTATION OF MI                            | Minus                    | ***                            | CLAIM        | =                |            | X42=               |                        | OR    | X84=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |  |   |                          |                                |              |                  |            | +140=              |                        | OR    | +280=               |                        |  |
|  |  |   |                          |                                |              |                  | <b>L</b> . | TOTAL<br>DDIT. FEE |                        | OR    | TOTAL<br>ADDIT FEE  |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                          |                                |              |                  |            |                    |                        | •     | ,                   |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                          | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NON  | Total  | *   | Minus                    | **                             |              | = ' '            |            | X\$ 9=             |                        | OR    | X\$18=              |                        |  |
| AME  | Independent  | * NTATION OF MU                           | Minus                    | ***                            | CI 494       | =                |            | X42=               |                        | OR.   | X84=                |                        |  |
| <u> </u>   | LIMO I PHESE   | INTATION OF M                             | JETIPLE DEF              | - ENDEN!                       | CLAIM        |                  |            | +140=              |                        | OR    | +280=               |                        |  |
| ***  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                          |                                |              |                  |            |                    |                        |       |                     |                        |  |